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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/764,072	01/23/2004	Paul Scheb JR.	SCH1.001	8004
39863	7590	06/01/2006	EXAMINER	
SONNABENDLAW 600 PROSPECT AVE BROOKLYN, NY 11215				LAYNO, BENJAMIN
ART UNIT		PAPER NUMBER		
		3711		

DATE MAILED: 06/01/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>Interview Summary</b>	<b>Application No.</b>	<b>Applicant(s)</b>	
	10/764,072	SCHEB ET AL.	
	<b>Examiner</b>	<b>Art Unit</b>	
	Benjamin H. Layno	3711	

All participants (applicant, applicant's representative, PTO personnel):

(1) Jeff Sonnabend. (3) \_\_\_\_\_.

(2) Benjamin Layno. (4) \_\_\_\_\_.

Date of Interview: 11 May 2006.

Type: a) Telephonic b) Video Conference  
c) Personal [copy given to: 1) applicant 2) applicant's representative]

Exhibit shown or demonstration conducted: d) Yes e) No.  
If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: 1,20 and 39.

Identification of prior art discussed: \_\_\_\_\_.

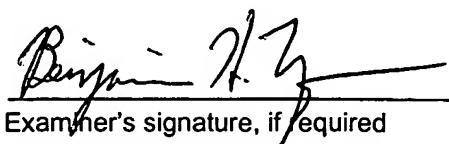
Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The Examiner and Applicant's Representative discussed the definition of "doubles" and "trifectas". The Examiner agreed to reconsider the claims if an amendment is submitted reciting non-consecutive outcomes to more clearly define the "doubles" and "trifectas".

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

  
Examiner's signature, if required